9/9/80

POTENTIAL HAZARDOUS WASTE SITE
SITE INSPECTION REPORT

EPA

REGION	SITE NUMBER (to be assigned by HQ)
5	

GENERAL INSTRUCTIONS: Complete Sections I and III through XV of this form as completely as possible. Then use the information on this form to develop a Tentative Disposition (Section II). File this form in its entirety in the regional Hazardous Waste Log File. Be sure to include all appropriate Supplemental Reports in the file. Submit a copy of the forms to: U.S. Environmental Protection Agency, Site Tracking System, Hazardous Waste Enforcement Task Force (EN-335), 401 M St., SW, Washington, DC 20460.

I. SITE IDENTIFICATION

A. SITE NAME: AMERICAN CHEMICAL SERVICES

B. STREET (or other identifier): NORTH OF INTERSECTION OF ARBOR AST, COLFAX, AND REDAR

C. CITY: GRIFFITH

D. STATE: INDIANA

E. ZIP CODE: 46319

F. COUNTY NAME: LAKE

G. SITE OPERATOR INFORMATION

1. NAME: JAMES TARPO

2. TELEPHONE NUMBER: 219-924-4370

3. STREET: COLFAX AVENUE

4. CITY: GRIFFITH

5. STATE: INDIANA

6. ZIP CODE: 46319

H. REALTY OWNER INFORMATION (if different from operator of site)

1. NAME:

2. TELEPHONE NUMBER:

3. CITY:

4. STATE:

5. ZIP CODE:

I. SITE DESCRIPTION

INDUSTRIAL LANDFILL WHICH ACCEPTED POSSIBLE HAZARDOUS WASTE

J. TYPE OF OWNERSHIP

☐ 1. FEDERAL ☐ 2. STATE ☐ 3. COUNTY ☐ 4. MUNICIPAL ☒ 5. PRIVATE

II. TENTATIVE DISPOSITION (complete this section last)

A. ESTIMATE DATE OF TENTATIVE DISPOSITION (mo., day, & yr.):

B. APPARENT SERIOUSNESS OF PROBLEM

☐ 1. HIGH ☐ 2. MEDIUM ☐ 3. LOW ☐ 4. NONE

C. PREPARER INFORMATION

1. NAME:

2. TELEPHONE NUMBER:

3. DATE (mo., day, & yr.):

III. INSPECTION INFORMATION

A. PRINCIPAL INSPECTOR INFORMATION

1. NAME: JEROME D. OSKVAREK

2. TITLE: GEOCHEMIST

3. ORGANIZATION: ECOLOGY AND ENVIRONMENT INC.

4. TELEPHONE NO. (area code & no.): 312-663-9415

B. INSPECTION PARTICIPANTS

1. NAME	2. ORGANIZATION	3. TELEPHONE NO.
FRED FIEST	ECOLOGY AND ENVIRONMENT INC	312-663-9415
JOHN ANGELO	ECOLOGY AND ENVIRONMENT INC	312-663-9415
C.F. BIERE	ECOLOGY AND ENVIRONMENT INC	312-663-9415

C. SITE REPRESENTATIVES INTERVIEWED (corporate officials, workers, residents)

1. NAME	2. TITLE & TELEPHONE NO.	3. ADDRESS
JAMES TARPO	OWNER, AMERICAN CHEMICAL SERVICE, 219-924-4370	COLFAX AVE. GRIFFITH, IN, 46319

EPA Region 5 Records Ctr.
267385

Continue On Reverse

Continued From Front

III. INSPECTION INFORMATION (continued)

D. GENERATOR INFORMATION (sources of waste)

1. NAME	2. TELEPHONE NO.	3. ADDRESS	4. WASTE TYPE GENERATED

E. TRANSPORTER/HAULER INFORMATION

1. NAME	2. TELEPHONE NO.	3. ADDRESS	4. WASTE TYPE TRANSPORTED

F. IF WASTE IS PROCESSED ON SITE AND ALSO SHIPPED TO OTHER SITES, IDENTIFY OFF-SITE FACILITIES USED FOR DISPOSAL.

1. NAME	2. TELEPHONE NO.	3. ADDRESS

G. DATE OF INSPECTION (mo., day, & yr.)	H. TIME OF INSPECTION	I. ACCESS GAINED BY: (credentials must be shown in all cases)
SEPTEMBER 9, 1980	1025 TO 1125 (AM)	☒ 1. PERMISSION ☐ 2. WARRANT

J. WEATHER (describe) TEMPERATURE 70 TO 75°F; OVERCAST WITH A SLIGHT MIST; WIND FROM WEST. SITE HAD JUST RECEIVED 0.25 TO 0.50 INCH OF RAIN BEFORE INSPECTION.

IV. SAMPLING INFORMATION

A. Mark 'X' for the types of samples taken and indicate where they have been sent e.g., regional lab, other EPA lab, contractor, etc. and estimate when the results will be available.

1. SAMPLE TYPE	2. SAMPLE TAKEN (mark 'X')	3. SAMPLE SENT TO:	4. DATE RESULTS AVAILABLE
a. GROUNDWATER			
b. SURFACE WATER			
c. WASTE			
d. AIR			
e. RUNOFF			
f. SPILL			
g. SOIL			
h. VEGETATION			
i. OTHER (specify)			

B. FIELD MEASUREMENTS TAKEN (e.g., radioactivity, explosivity, PH, etc.)

1. TYPE	2. LOCATION OF MEASUREMENTS	3. RESULTS
METAL DETECTOR	CENTRAL AREA OF SITE	PUT LIMITATIONS TO THE EXTENT OF DRUM DISPOSAL ON SITE.

Continue On Page 3

Continued From Page 2

IV. SAMPLING INFORMATION (continued)

C. PHOTOS

1. TYPE OF PHOTOS: [X] a. GROUND [ ] b. AERIAL

2. PHOTOS IN CUSTODY OF: RODNEY BLOESE

D. SITE MAPPED? [X] YES. SPECIFY LOCATION OF MAPS: AREA HAS RECENT PLAT MADE FOR THE TRANSFER OF LAND.

E. COORDINATES

1. LATITUDE (deg.-min.-sec.): 41° 31' 19"

2. LONGITUDE (deg.-min.-sec.): 87° 24' 57"

V. SITE INFORMATION

A. SITE STATUS

[ ] 1. ACTIVE (Those industrial or municipal sites which are being used for waste treatment, storage, or disposal on a continuing basis, even if infrequently.)

[X] 2. INACTIVE (Those sites which no longer receive wastes.)

[ ] 3. OTHER (specify): (Those sites that include such incidents like "midnight dumping" where no regular or continuing use of the site for waste disposal has occurred.)

B. IS GENERATOR ON SITE?

[X] 1. NO [ ] 2. YES (specify generator's four-digit SIC Code):

C. AREA OF SITE (in acres): 26.0

D. ARE THERE BUILDINGS ON THE SITE?

[X] 1. NO [ ] 2. YES (specify):

VI. CHARACTERIZATION OF SITE ACTIVITY

Indicate the major site activity(ies) and details relating to each activity by marking 'X' in the appropriate boxes.

'X'	A. TRANSPORTER	'X'	B. STORER	'X'	C. TREATER	'X'	D. DISPOSER
	1. RAIL		1. PILE		1. FILTRATION	X	1. LANDFILL
	2. SHIP		2. SURFACE IMPOUNDMENT		2. INCINERATION		2. LANDFARM
	3. BARGE		3. DRUMS		3. VOLUME REDUCTION		3. OPEN DUMP
	4. TRUCK		4. TANK, ABOVE GROUND		4. RECYCLING/RECOVERY		4. SURFACE IMPOUNDMENT
	5. PIPELINE		5. TANK, BELOW GROUND		5. CHEM./PHYS./TREATMENT		5. MIDNIGHT DUMPING
	6. OTHER (specify):		6. OTHER (specify):		6. BIOLOGICAL TREATMENT		6. INCINERATION
					7. WASTE OIL REPROCESSING		7. UNDERGROUND INJECTION
					8. SOLVENT RECOVERY		8. OTHER (specify):
					9. OTHER (specify):		

E. SUPPLEMENTAL REPORTS: If the site falls within any of the categories listed below, Supplemental Reports must be completed. Indicate which Supplemental Reports you have filled out and attached to this for..

[ ] 1. STORAGE [ ] 2. INCINERATION [X] 3. LANDFILL [ ] 4. SURFACE IMPOUNDMENT [ ] 5. DEEP WELL

[ ] 6. CHEM/BIO/PHYS TREATMENT [ ] 7. LANDFARM [ ] 8. OPEN DUMP [ ] 9. TRANSPORTER [ ] 10. RECYCLER/RECLAIMER

VII. WASTE RELATED INFORMATION

A. WASTE TYPE

[ ] 1. LIQUID [X] 2. SOLID [X] 3. SLUDGE [ ] 4. GAS

B. WASTE CHARACTERISTICS

[X] 1. CORROSIVE [ ] 2. IGNITABLE [ ] 3. RADIOACTIVE [ ] 4. HIGHLY VOLATILE

[ ] 5. TOXIC [ ] 6. REACTIVE [ ] 7. INERT [ ] 8. FLAMMABLE

[ ] 9. OTHER (specify):

C. WASTE CATEGORIES

1. Are records of wastes available? Specify items such as manifests, inventories, etc. below.

NO, LOST IN 1975 ROBBERY

 Continue On Reverse

Continued From Page 2

V. WASTE RELATED INFORMATION (continued)

3. LIST SUBSTANCES OF GREATEST CONCERN WHICH MAY BE ON THE SITE (place in descending order of hazard).

1) PCE
2) TOLUENE
3) XYLENE
4) HALOGENATED SOLVENTS
5) PHENOLS
6) CHROMIC ACID
7) ACIDS

4. ADDITIONAL COMMENTS OR NARRATIVE DESCRIPTION OF SITUATION KNOWN OR REPORTED TO EXIST AT THE SITE.

LEACHATE DISCHARGE ON TO GRIFFITH LANDFILL WHICH THEN FLOWS TO TURKEY CREEK, POSSIBLE CONTAMINATION OF GREENS AT GRIFFITH LANDFILL AND SHALLOW GROUNDWATER

VI. HAZARD DESCRIPTION

A. TYPE OF HAZARD	B. POTENTIAL HAZARD (mark 'X')	C. ALLEGED INCIDENT (mark 'X')	D. DATE OF INCIDENT (mo., day, yr.)	E. REMARKS
1. NO HAZARD				
2. HUMAN HEALTH				
3. NON-WORKER INJURY/EXPOSURE				
4. WORKER INJURY				
5. CONTAMINATION OF WATER SUPPLY	X			
6. CONTAMINATION OF FOOD CHAIN				
7. CONTAMINATION OF GROUND WATER	X			
8. CONTAMINATION OF SURFACE WATER	X	X	5/8+9/80	EPA SITE INVESTIGATION, INCL ADJACENT WETLANDS
9. DAMAGE TO FLORA/FAUNA	X			
10. FISH KILL				
11. CONTAMINATION OF AIR				
12. NOTICEABLE ODORS				
13. CONTAMINATION OF SOIL	X			
14. PROPERTY DAMAGE				
15. FIRE OR EXPLOSION				
16. SPILLS/LEAKING CONTAINERS/ RUNOFF/STANDING LIQUIDS	X	X	5/8+9/80	EPA SITE INVESTIGATION, LEACHATE FLOWS AND RUNOFF
17. SEWER, STORM DRAIN PROBLEMS				
18. EROSION PROBLEMS				
19. INADEQUATE SECURITY				
20. INCOMPATIBLE WASTES	X			
21. MIDNIGHT DUMPING				
22. OTHER (specify):				

Continue On Reverse

Continued From Front

VII. PERMIT INFORMATION

A. INDICATE ALL APPLICABLE PERMITS HELD BY THE SITE.

- [ ] 1. NPDES PERMIT
- [ ] 2. SPCC PLAN
- [ ] 3. STATE PERMIT (specify): _____
- [ ] 4. AIR PERMITS
- [ ] 5. LOCAL PERMIT
- [ ] 6. RCRA TRANSPORTER
- [ ] 7. RCRA STORER
- [ ] 8. RCRA TREATER
- [ ] 9. RCRA DISPOSER
- [ ] 10. OTHER (specify): _____

B. IN COMPLIANCE?

- [ ] 1. YES
- [x] 2. NO
- [ ] 3. UNKNOWN

4. WITH RESPECT TO (list regulation name & number): _____

VIII. PAST REGULATORY ACTIONS

- [x] A. NONE
- [ ] B. YES (summarize below)

NONE KNOWN

IX. INSPECTION ACTIVITY (past or on-going)

- [ ] A. NONE
- [x] B. YES (complete items 1,2,3, & 4 below)

1. TYPE OF ACTIVITY	2. DATE OF PAST ACTION (mo., day, & yr.)	3. PERFORMED BY: (EPA/State)	4. DESCRIPTION
EPA On-Site Invest.	5/8+9/80	US EPA	Sampling And Reconnaissance

X. REMEDIAL ACTIVITY (past or on-going)

- [ ] A. NONE
- [X] B. YES (complete items 1, 2, 3, & 4 below)

1. TYPE OF ACTIVITY	2. DATE OF PAST ACTION (mo., day, & yr.)	3. PERFORMED BY: (EPA/State)	4. DESCRIPTION
311 Response	7-30-80	USEPA	Clay Berm To Retain Leachate

NOTE: Based on the information in Sections III through X, fill out the Preliminary Assessment (Section II) information on the first page of this form.

Continued From Front

VII. WASTE RELATED INFORMATION (continued)

2. Estimate the amount (specify unit of measure) of waste by category, mark 'X' to indicate which wastes are present.

a. SLUDGE	b. OIL	c. SOLVENTS	d. CHEMICALS	e. SOLIDS	f. OTHER
AMOUNT: UNKNOWN	AMOUNT:	AMOUNT:	AMOUNT: UNKNOWN	AMOUNT: UNKNOWN	AMOUNT:
UNIT OF MEASURE:	UNIT OF MEASURE:	UNIT OF MEASURE:	UNIT OF MEASURE:	UNIT OF MEASURE:	UNIT OF MEASURE:
X (1) PAINT, PIGMENTS	X (1) OILY WASTES	X (1) HALOGENATED SOLVENTS	X (1) ACIDS	X (1) FLYASH	X (1) LABORATORY PHARMACEUT.
(2) METALS SLUDGES	(2) OTHER (specify):	(2) NON-HALOGNTD. SOLVENTS	(2) PICKLING LIQUORS	(2) ASBESTOS	(2) HOSPITAL
(3) POTW		(3) OTHER (specify):	(3) CAUSTICS	(3) MILLING/MINE TAILINGS	(3) RADIOACTIVE
(4) ALUMINUM SLUDGE			(4) PESTICIDES	(4) FERROUS SMELTING WASTES	(4) MUNICIPAL
(5) OTHER (specify):			(5) DYES/INKS	(5) NON-FERROUS SMLTG. WASTES	(5) OTHER (specify)
			(6) CYANIDE	(6) OTHER (specify):	
			(7) PHENOLS		
			(8) HALOGENS		
			(9) PCB		
			(10) METALS		
			(11) OTHER (specify):		

D. LIST SUBSTANCES OF GREATEST CONCERN WHICH ARE ON THE SITE (place in descending order of hazard)

1. SUBSTANCE	2. FORM (mark 'X')			3. TOXICITY (mark 'X')				4. CAS NUMBER	5. AMOUNT	6. UNIT
	a. SOLID	b. LIQ.	c. VAPOR	a. HIGH	b. MED.	c. LOW	d. NONE			

VIII. HAZARD DESCRIPTION

FIELD EVALUATION HAZARD DESCRIPTION: Place an 'X' in the box to indicate that the listed hazard exists. Describe the hazard in the space provided.

☐ A. HUMAN HEALTH HAZARDS

N/A

Continue On Page 5

Continued From Page 4

VIII. HAZARD DESCRIPTION (continued)

☐ B. NON-WORKER INJURY/EXPOSURE

N/A

☐ C. WORKER INJURY/EXPOSURE

N/A, No WORKERS ON SITE SINCE 1-1-76

☐ D. CONTAMINATION OF WATER SUPPLY

N/A, CITY ON GARY HOBART WATER SYSTEM, LOOK [illegible] FOR UPGRADE

☐ E. CONTAMINATION OF FOOD CHAIN

N/A

☒ F. CONTAMINATION OF GROUND WATER SOME OF THE FLUIDS WHICH ARE SEEN IN A IMPOUNDMENT (LEACHATE POND) ON NORTHEAST SIDE OF THE DUMP AREA OF SITE, MAY BE PERCOLATING DOWNWARD. THIS MAY BE CONTAMINATING THE Shallow aquifer.

☐ G. CONTAMINATION OF SURFACE WATER

N/A

☒ H. DAMAGE TO FLORA/FAUNA

FLORA DAMAGE IN THE AREA AROUND LEACHATE POND, 1/2 TO 1 FOOT AWAY FROM POND.

☐ I. FISH KILL

N/A, NO FISH ON SITE

☐ J. CONTAMINATION OF AIR

N/A

☒ K. NOTICEABLE ODORS ODOR FROM LEACHATE POND, HAS AN "SWEET" ORGANIC ODOR

☒ L. CONTAMINATION OF SOIL AREA AROUND LEACHATE POND, CONTAMINATED BY LEACHATE WHICH HAS CAUSED STAINING OF THE SURFACE MATERIAL.

☐ M. PROPERTY DAMAGE

N/A,

Continue On Page 7

☐ N. FIRE OR EXPLOSION

N/A

☒ O. SPILLS/LEAKING CONTAINERS/RUNOFF/STANDING LIQUID LEACHATE POND ON NORTHEAST SIDE OF [illegible] IS FED BY A SINGLE STREAM OF LEACHATE with Evidence of past flows in the surrounding area of the fill face. (cobbins)

☐ P. SEWER, STORM DRAIN PROBLEMS

N/A

☒ Q. EROSION PROBLEMS THE MAIN DUMP AREA HAS SOME EROSION ON THE EAST, NORTHEAST AND NORTH SIDE

☒ R. INADEQUATE SECURITY AREA IS NOT FENCED, BUT THERE DOES NOT APPEAR TO BE ANY VANDALISM OR DUMPING ON SITE AS A RESULT OF THE LACK OF A FENCE. TREES AND AN EARTHEN BERM ON EAST AND NORTH, ISOLATE THE SITE FROM THE NEARBY ROAD (COLFAX)

☐ S. INCOMPATIBLE WASTES

N/A

VIII. HAZARD DESCRIPTION (continued)

☐ T. MIDNIGHT DUMPING

N/A

☐ U. OTHER (specify):

N/A

IX. POPULATION DIRECTLY AFFECTED BY SITE

A. LOCATION OF POPULATION	B. APPROX. NO. OF PEOPLE AFFECTED	C. APPROX. NO. OF PEOPLE AFFECTED WITHIN UNIT AREA	D. APPROX. NO. OF BUILDINGS AFFECTED	E. DISTANCE TO SITE (specify units)
1. IN RESIDENTIAL AREAS	50	50	22	WITHIN 2000 FEET
2. IN COMMERCIAL OR INDUSTRIAL AREAS	50	50	14	WITHIN 2000 FEET
3. IN PUBLICLY TRAVELLED AREAS	Unknown	Unknown	Unknown	within 200 Feet
4. PUBLIC USE AREAS (parks, schools, etc.)	None	None	None	within 200 Feet

X. WATER AND HYDROLOGICAL DATA

A. DEPTH TO GROUNDWATER (specify units)	B. DIRECTION OF FLOW	C. GROUNDWATER USE IN VICINITY
27-35 Feet (2nd Sand Layer)	Probably To Southwest	Unknown
D. POTENTIAL YIELD OF AQUIFER	**E. DISTANCE TO DRINKING WATER SUPPLY (specify unit of measure)**	**F. DIRECTION TO DRINKING WATER SUPPLY**
12-15 GPM	Unknown	Unknown

G. TYPE OF DRINKING WATER SUPPLY

☐ 1. NON-COMMUNITY < 15 CONNECTIONS ☒ 2. COMMUNITY (specify town): Gary - Hobart > 15 CONNECTIONS

☐ 3. SURFACE WATER ☒ 4. WELL

Continue On Page 9

Continued From Page 8

X. WATER AND HYDROLOGICAL DATA (continued)

H. LIST ALL DRINKING WATER WELLS WITHIN A 1/4 MILE RADIUS OF SITE

1. WELL	2. DEPTH (specify unit)	3. LOCATION (proximity to population/buildings)	4. NON-COMMUNITY (mark 'X')	5. COMMUNITY (mark 'X')
2"	50'	1921 COLFAX [illegible]	X	
2"	51'	1026 ABERGAST	X	

I. RECEIVING WATER

1. NAME: None

☐ 2. SEWERS ☐ 3. STREAMS/RIVERS ☐ 4. LAKES/RESERVOIRS ☐ 5. OTHER (specify):

6. SPECIFY USE AND CLASSIFICATION OF RECEIVING WATERS

XI. SOIL AND VEGITATION DATA

LOCATION OF SITE IS IN: N/A

☐ A. KNOWN FAULT ZONE ☐ B. KARST ZONE ☐ C. 100 YEAR FLOOD PLAIN ☐ D. WETLAND

☐ E. A REGULATED FLOODWAY ☐ F. CRITICAL HABITAT ☐ G. RECHARGE ZONE OR SOLE SOURCE AQUIFER

XII. TYPE OF GEOLOGICAL MATERIAL OBSERVED

Mark 'X' to indicate the type(s) of geological material observed and specify where necessary, the component parts.

X	A. OVERBURDEN	X	B. BEDROCK (specify below)	X	C. OTHER (specify below)
X	1. SAND	X	130' BELOW, TILL CLAY ABOVE BEDROCK		
X	2. CLAY				
	3. GRAVEL				

XIII. SOIL PERMEABILITY

☐ A. UNKNOWN ☐ B. VERY HIGH (100,000 to 1000 cm/sec.) ☐ C. HIGH (1000 to 10 cm/sec.)

☐ D. MODERATE (10 to .1 cm/sec.) ☒ E. LOW (.1 to .001 cm/sec.) ☐ F. VERY LOW (.001 to .00001 cm/sec.)

G. RECHARGE AREA

☐ 1. YES ☒ 2. NO 3. COMMENTS:

H. DISCHARGE AREA

☐ 1. YES ☒ 2. NO 3. COMMENTS:

I. SLOPE

1. ESTIMATE % OF SLOPE 2. SPECIFY DIRECTION OF SLOPE, CONDITION OF SLOPE, ETC.

J. OTHER GEOLOGICAL DATA

SITE HAS SURFACE SAND LAYER, UNDERLAIN BY TILL CLAY LAYER WHICH IS 10-15 FEET THICK IN THE AREA, WHICH IS ITSELF UNDERLAIN BY A SAND UNIT. THE CLAY UNIT HAS AN estimated HYDRAULIC CONDUCTIVITY OF 10^{-7} CM/SEC

LANDFILLS SITE INSPECTION REPORT
(Supplemental Report)

INSTRUCTION
Answer and Explain as Necessary.

1. EVIDENCE OF SITE INSTABILITY (Erosion, Settling, Sink Holes, etc)
☒ YES ☐ NO EXPOSURE OF DISPOSED DRUM DUE TO EROSION OF COVER CLAY AT FRINGES OF DUMP AREA OF THE SITE

2. EVIDENCE OF IMPROPER DISPOSAL OF BULK LIQUIDS, SEMI-SOLIDS AND SLUDGES INTO THE LANDFILL
☐ YES ☒ NO

3. CHECK RECORDS OF CELL LOCATION AND CONTENTS AND BENCHMARK
☐ YES ☒ NO

4. WASTES SURROUNDED BY SORBENT MATERIAL
☐ YES ☒ NO

5. DIVERSION STRUCTURES ARE EFFECTIVELY CONSTRUCTED AND PROPERLY MAINTAINED
☐ YES ☒ NO

6. EVIDENCE OF PONDING OF WATER ON SITE
☒ YES ☐ NO YES, LEACHATE POND ON NE SIDE OF DUMP AREA ON THE SITE.

7. EVIDENCE OF IMPROPER/INADEQUATE DRAINING
☐ YES ☒ NO

8. ADEQUATE LEACHATE COLLECTION SYSTEM (If "Yes", specify Type)
☐ YES ☒ NO

8a. SURFACE LEACHATE SPRING
YES ☐ NO DUE TO CRACK IN CLAY BERM

9. RECORDS OF LEACHATE ANALYSIS
☒ YES ☐ NO USEPA samples collected Nov 8 and 9, 1980

10. GAS MONITORING
☐ YES ☒ NO

11. GROUNDWATER MONITORING WELLS
☐ YES ☒ NO

12. ARTIFICIAL MEMBRANE LINER INSTALLED
☐ YES ☒ NO

13. SPECIFIC CONTAINMENT MEASURES (Clay Bottom, Sides, etc)
☐ YES ☒ NO BUT TO BE DETERMINE

14. FIXATION (Stabilization) OF WASTE
☐ YES ☒ NO

15. ADEQUATE CLOSURE OF INACTIVE PORTION OF FACILITY
☐ YES ☒ NO

16. COVER (Type)
SOME CLAY. LAST APPLICATION WAS 1974 OR 1975 WHEN SITE WAS CLOSED

16a. THICKNESS
VARIABLE DUE TO EROSION, 0 TO 2 FEET

16b. PERMEABILITY
UNKNOWN

16c. DAILY APPLICATION
☐ YES ☐ NO NOT APPLICABLE

Continued From Front

XIV. PERMIT INFORMATION

List all applicable permits held by the site and provide the related information.

A. PERMIT TYPE (e.g., RCRA, State, NPDES, etc.)	B. ISSUING AGENCY	C. PERMIT NUMBER	D. DATE ISSUED (mo., day, & yr.)	E. EXPIRATION DATE (mo., day, & yr.)	F. IN COMPLIANCE (mark "X")		
					1. YES	2. NO	3. UNKNOWN

XV. PAST REGULATORY OR ENFORCEMENT ACTIONS

☐ NONE ☒ YES (summarize in this space)

311 RESPONSE AFTER MAY 8-9, 1980 INSPECTION, TO CONTROL A LEACHATE PLUME.

NOTE: Based on the information in Sections III through XV, fill out the Tentative Disposition *(Section II)* information on the first page of this form.